

PART 2: SPECIAL PERMIT USE

I. SPECIAL USE CATEGORY

Check type of application(s) applying for:

- | | |
|--|--|
| <input type="checkbox"/> Accessory Dwelling | <input type="checkbox"/> Stand for the Sale of Agricultural |
| <input type="checkbox"/> Bed And Breakfast | <input type="checkbox"/> Products |
| <input type="checkbox"/> Caretaker/Security Quarters | <input type="checkbox"/> Temporary Amusement/Special Event |
| <input type="checkbox"/> Mobile, Outdoor Retail/Food Vendor | <input type="checkbox"/> Temporary Outdoor Retail Sales |
| <input type="checkbox"/> Seasonal Equestrian Show/Special | <input type="checkbox"/> Temporary Tent |
| <input type="checkbox"/> Event | <input type="checkbox"/> Other |

II. GENERAL SUBMITTAL CHECKLIST

PLEASE CHECK
YES NO N/A

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a. Provide five (5) copies of the following documents:

1. Completed application (Part 1 and Part 2)
2. Warranty deed including property control number or folio number and legal description of the property.
3. Signed and sealed survey (not more than one year old) including any and all easements of record (referenced by OR Book and Page) prepared by a surveyor registered in the State of Florida.
4. Certificate of Fire Proofing for tent structures.
5. Unity of Title (if applicable).

b. Application fee.

c. Electronic files (PDF, JPEG, Word) of all items on the checklist, including the application, saved with proper corresponding title.

d. Accessory dwelling occupancy required proof of elderly, physically disabled or meets the low income standards as defined in Article 3.

e. Documentation of not-for-profit status.

f. Circulation Plan including traffic control and parking plan for the special use/event.

g. Traffic statement signed and sealed by a Professional Engineer.

h. Wellington Business Tax Receipt for the current year.

III. SITE PLAN (Five Copies)

24" x 36" with scale not smaller than 100' to an inch.

PLEASE CHECK

YES NO N/A

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a. Access points to the property for those attending the special use/event.

b. Special use/event area square footage

c. Location, setbacks, and footprint of tent or other structures.

d. Location where permit will be posted.

e. Location of all proposed signage.

f. Complete event layout.

IV. EQUESTRIAN SHOW SUBMITTAL CHECKLIST

(In addition to items II. and III. For Equestrian Shows for more than four days or two events)

PLEASE CHECK

YES NO N/A

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a. Signed and notarized Notice Affidavit

b. Completed Notice of Application for Special Use

c. A list of all owners within a five hundred (500) foot radius of boundary lines of the subject property from the most recent tax roll information as provided by the Palm Beach Property Appraiser's Office

d. Executed affidavit signed by the person responsible for completing the property owner list

e. One (1) sets of POSTAGE PAID first class envelopes with the typed names of the owners within a five hundred (500) foot radius of the boundary lines of the subject property and Wellington's return address required..

IV. JUSTIFICATION STATEMENT (Attach to Application)

The applicant shall provide a Justification Statement to explain how the request conforms to the following:

1. **Consistency with Wellington Comprehensive Plan**—the proposed Special Permit Use is consistent with the purposes, goals, objectives and policies of the Comprehensive Plan.
2. **Complies with supplementary use standards**—the proposed Special Permit Use complies with all relevant and appropriate portions of LDRS Section 6.4, Use Regulations & Definitions and Section 6.6 Supplementary Regulations.
3. **Compatibility with surrounding uses and zones**—the proposed Special Permit Use is consistent with the character of the immediate vicinity of the land proposed for development.

4. **Design minimizes adverse impact**—the design of the proposed Special Permit Use minimizes adverse effects, including visual impact, of the proposed use on adjacent lands.
5. **Duration**—the length of time the proposed Special Permit Use will occur and how impacts will be minimized. (Dates and Times)
6. **Health and sanitation**—the proposed Special Permit Use complies with all relevant standards related to health and sanitation as determined by the Palm Beach County Public Health Unit.
7. **Traffic considerations**—the proposed Special Permit Use complies with all relevant transportation standards as determined by Wellington Engineering Department.
8. **Consistent with the LDRS**—the proposed Special Permit Use complies with all additional standards imposed on it by all other applicable provisions of the LDRS.
9. **Adequate public facilities**—permanent structures shall comply with Article 11, Adequate Public Facilities Standards, of the LDRS.

V. EVENT INFORMATION

A. **Describe Special Use/Event Proposed:** Provide the LDR Section that authorizes your request and description of the use/event. If live entertainment is proposed as a part of the use/event, provide a description of the type of entertainment and whether amplified sound will or will not be used as a part of the entertainment.

B. Is entertainment proposed at the event? _____ What type of entertainment is proposed?

C. If applicable, state the hours of operation for the entertainment: _____

D. Will amplified sound be used? _____

E. Provide the number of vendors anticipated for the use/event: _____

F. Will food be served? _____ Will alcohol be served? _____

G. Provide the anticipated attendance for the special use/event: _____

H. If a horse show, number of entries each day: _____

I. Building permit number for all Special Use Permits with temporary tents greater than 10'x10':

VI. NOTICE OF APPLICATION FOR SPECIAL PERMIT USE
(Only applicable to Equestrian Show Permits for more than four days or two events)

This notice is furnished to you, as required by the Land Development Regulations, to notify all persons owning property within 500 feet of the property involved in an application for a Special Permit Use.

Applicant: _____

Special Use Property Address: _____

Subdivision/Commercial Site Name: _____

Special Use Applied for: _____

Dates of Special Use: _____

Hours of Special Use: _____

Council Date (if applicable) _____

If you have any questions regarding the petition, please contact:

Wellington Planning and Zoning Department
12300 Forest Hill Boulevard,
Wellington, FL 33414
(561) 791-4000

VII. AGREEMENT FOR REMOVAL OF TEMPORARY FACILITY

(Applicable to all events utilizing temporary facilities such as tents, rides, bounces houses, bleachers, etc.)

Before me, the undersigned authority, personally appeared _____, who, having first been duly sworn; deposes and says:

That he/she is the Agent of the following described land in Palm Beach County, Florida, to wit: for temporary rides, carnival, circus, revival tent, bazaar, and other temporary events:

That the undersigned was granted special permit use approval by Wellington Planning and Zoning Division on _____ to have a Temporary Facility on the above-described property for maximum period of _____ days, the dates being _____ through _____. It is understood that the undersigned agrees to the following:

- 1) The property will be self-policed during the period the permit for temporary outdoor retail sales is active and, furthermore, that said property will be returned to an orderly and sanitary condition after the expiration of said temporary permit;
- 2) Said facility is to be inspected by the area's Fire Marshall prior to the erection of the temporary facility and shall be inspected upon completion of all activities; and
- 3) No electricity shall be provided to the facility unless Wellington Building Division issues an approved Electrical Permit. It is understood that the undersigned at their volition will remove said temporary facility by the expiration date noted above.
- 4) To fulfill all conditions of approval for the special use permit.

Signature: _____

Witness: _____

Witness: _____

NOTARY

STATE OF _____

COUNTY OF _____

The foregoing instrument was acknowledged before me this _____ day of _____, 20_____

by _____. He/She is personally known to me or has produced

_____ as identification and did/did not take an oath.

_____. My Commission Expires: _____

(Signature of Notary)

(Name – Must be typed, printed, or stamped)

(NOTARY'S SEAL OR STAMP)

VIII. NOTICE AFFIDAVIT

(Only applicable to Equestrian Show Permits for more than four days or two events)

Before me this day personally appeared _____
who being duly sworn, deposes and says:

1. The accompanying Property Owners List is, to the best of his/her knowledge, a complete and accurate list of all property owners, mailing addresses and property control numbers as recorded in the latest official tax rolls of the Palm Beach County Property Appraiser for all property within five hundred (500) feet of the below described parcel of land.
2. The accompanying Property Owners List included, to the best of his/her knowledge, all affected municipalities and/or counties, in accordance with Wellington notice requirements and/or policies.
3. A tax map highlighting the properties located within five hundred feet of the parcel of land that is the subject of the request is attached as part of this application. The accompanying Property Owner's list contains the required information for all properties highlighted on the tax map.
4. Public notice, which is his/her obligation to provide, will be in accordance with Wellington requirements.

The property in question is: ☐ legally described as follows ☐ see attached legal description

Signature

Print, type or stamp name here

NOTARY

STATE OF _____

COUNTY OF _____

The foregoing instrument was acknowledged before me this _____ day of _____,
20____ By _____, who is personally known to me or has
produced _____ as identification and who did/did not take an
oath.

Signature of person taking Acknowledgement

Printed Signature

My Commission Expires: